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CONFIRMATION NO. 6686

<b>SERIAL NUMBER</b> 09/933,640	<b>FILING OR 371(c) DATE</b> 08/20/2001 <b>RULE</b>	<b>CLASS</b> 800	<b>GROUP ART UNIT</b> 1632	<b>ATTORNEY DOCKET NO.</b> 6627-PA1071
<b>APPLICANTS</b> Eliezer Masliah, San Diego, CA; Edward Rockenstein, Chula Vista, CA; Margaret E. Mallory, Encinitas, CA;				
<b>** CONTINUING DATA *****</b> <i>AmB</i> This application is a CIP of PCT/US01/05569 02/20/2001 which claims benefit of 60/183,571 02/18/2000				
<b>** FOREIGN APPLICATIONS *****</b> <i>AmJ</i> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 09/21/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>AmJ</i>		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 37
Verified and Acknowledged Examiner's Signature <i>AmJ</i> Initials		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 25225				
<b>TITLE</b> Development of transgenic model for interventions in neurodegenerative diseases				
<b>FILING FEE RECEIVED</b> 998	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	